

STATEMENT OF ORGANIZATION		OFFICE USE ONLY 1/3										
<div>1. Name and Address of Committee SPKR PAC 1063 MULLER PARKWAY B WESTWEGO LA 70094-5416</div>		<div>2. Date of this Statement 11/22/2013</div> <div>3. Estimated Membership 8</div> <div>4. Amended Statement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>										
<div>Check if new committee <input type="checkbox"/></div>		<div>Amendment PAC S/O 11/22</div> <div>13000197</div>										
<div>5. All Committee Officers and Directors (including Chairperson, Treasurer, If any, and any other committee officers and directors)</div> <table><thead><tr><th>Position</th><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>Chairperson</td><td></td><td></td></tr><tr><td>Treasurer</td><td></td><td></td></tr></tbody></table> <div>Please see attached sheets.</div>				Position	Name	Address	Chairperson			Treasurer		
Position	Name	Address										
Chairperson												
Treasurer												
<div>6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administrators or financially supports this committee.)</div> <table><thead><tr><th>Name</th><th>Address</th><th>Relationship to Committee</th></tr></thead><tbody></tbody></table> <div>Please see attached sheets.</div>				Name	Address	Relationship to Committee						
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<div>7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions)</div> <table><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody></tbody></table> <div>Please see attached sheets.</div>				Name	Address							
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<div>8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: <input type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee</div> <table><tbody><tr><td>b. Name of Candidate</td><td>c. Office Sought by the Candidate</td></tr></tbody></table> <div>Please see attached sheets.</div>				b. Name of Candidate	c. Office Sought by the Candidate							
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<div>9. Name of Person Preparing Report</div> <div>Daytime Telephone</div> <div>Please see attached sheets.</div>												
<div>10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.</div> <div>Dated 11/22/2013</div> <div><div>TERRY J ALARIO Signature of Committee Chairperson</div><div>504-341-2300 Daytime Telephone Number</div></div> <div><div>Signature of Committee Treasurer, if any</div><div>Daytime Telephone Number</div></div>												

STATEMENT OF ORGANIZATION

OFFICE USE ONLY 1/3

1. Name and Address of Committee
SPKR PAC
1063 MULLER PARKWAY

2. Date of this Statement
01/03/2013

3. Estimated Membership
8

4. Amended Statement?
____ Yes ☒ No

Check if new committee ____

PAC
S/O
1/4

Rec # 7472
#1252

13000197

2013 JAN -8 AM 9:03

5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)

Position	Name	Address
Chairperson		
Treasurer		

SCANNED

JAN 15 2013

By: j

Please see attached sheets.

6. Affiliated Organizations

(Any organization, other than a political committee, which directly or indirectly established, administrators or financially supports this committee.)

Name	Address	Relationship to Committee
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Please see attached sheets.

7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions)

Name	Address
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Please see attached sheets.

8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE:

a. Check one: ____ Principal Campaign Committee ____ Subsidiary Committee

b. Name of Candidate

c. Office Sought by the Candidate

Please see attached sheets.

9. Name of Person Preparing Report

Daytime Telephone

Please see attached sheets.

10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.

Dated 01/03/2013

JOHN ALARIO, JR
Signature of Committee Chairperson

504-340-2221
Daytime Telephone Number

Signature of Committee Treasurer, if any

Daytime Telephone Number

Affiliated Persons / Organizations

3/3

Name and Address of
TERRY J ALARIO

Chairperson:

Daytime Telephone (Preparer):

Candidate Information

Office Sought (Include title of office as well
as parish, city, town and/or election district)

Name of Political Party:

☐ SUPPORTED ☐ OPPOSED by the Committee

Rel of Aff. Org. to Comm:

Name and Address of Financial Institution
LA CAPITOL FEDERAL CREDIT UNION
P O BOX 3398

BATON ROUGE LA 70821-3398

Chairperson:

Daytime Telephone (Preparer):

Candidate Information

Office Sought (Include title of office as well
as parish, city, town and/or election district)

Name of Political Party:

☐ SUPPORTED ☐ OPPOSED by the Committee

Rel of Aff. Org. to Comm:

Name and Address of
TERRY J ALARIO

Chairperson:

Daytime Telephone (Preparer):

Candidate Information

Office Sought (Include title of office as well
as parish, city, town and/or election district)

Name of Political Party:

☐ SUPPORTED ☐ OPPOSED by the Committee

Rel of Aff. Org. to Comm:

AMENDMENT

Affiliated Persons / Organizations

3 / 3

Name and Address of Chair PersonMr JOHN ALARIO, Jr
1063 MULLER PARKWAY

WESTWEGO LA 70094

Chairperson:

Candidate Information**Office Sought (Include title of office as well as parish, city, town and/or election district)**

Name of Political Party:

☐ SUPPORTED ☐ OPPOSED by the Committee

Daytime Telephone (Preparer):

Rel of Aff. Org. to Comm:

Name and Address of Financial InstitutionLA CAPITOL FEDERAL CREDIT UNION
P O BOX 3398

BATON ROUGE LA 70821-3398

Chairperson:

Candidate Information**Office Sought (Include title of office as well as parish, city, town and/or election district)**

Name of Political Party:

☐ SUPPORTED ☐ OPPOSED by the Committee

Daytime Telephone (Preparer):

Rel of Aff. Org. to Comm:

Name and Address of Person Preparing ReportJOHN ALARIO JR
1063 MULLER PARKWAY

WESTWEGO LA 70094-5416

Chairperson:

Candidate Information**Office Sought (Include title of office as well as parish, city, town and/or election district)**

Name of Political Party:

☐ SUPPORTED ☐ OPPOSED by the Committee

Daytime Telephone (Preparer): 504-340-2221

Rel of Aff. Org. to Comm: